PATENT APPLICATION FEE DET	TERMINATION RECORD						
Effective October 1, 2001							

Application or Docket Number 10/03 425/1035 - 359

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN				
TOTAL CLAIMS			27	<u>''</u>	(Column 2)		ſ	RATE FEE		OR 1	SMALL	
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE			RATE BASIC FEE	740.00
TC	TAL CHARGE	ABLE CLAIMS	22 _{minus 20=}		*				070.00	OH		740.00
 -					- 7			X\$ 9=		OR	X\$18=	36
INDEPENDENT CLAIMS 5 minus 3 =						2		X42=		OR	X84=	168
								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2							· ·	TOTAL		OR	TOTAL	9
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NOR	Total	. 20	Minus	2	J	=		X\$ 9=		OR	X\$18=	
AR	Independent	* 6	Minus	*** C	CLAINA	= /		X42=		OR	XBAE	86
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=.		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	8601
	Name of Green Sur	(Column 1)			-DDI1. FEE (9	ADDII. PEEL	1			
AWENDWENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ROB	Total	. 20	Minus	** 6	22	- /		X\$ 9=		OR	X\$18=	
AME	Independent	. 6	Minus	*** (2	= /		X42=			X84=	-
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						} }			OR		
		Res	t Avai		0	OPV	L	+140=		OR	+280=	
		₽ ₩			♥ €	-	A	TOTAL UDDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST												
amendment C		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
20 20 20 30 30 30 30 30 30 30 30 30 30 30 30 30	Total	. 16	Minus	# 2	2	= //	Ī	X\$ 9=		OR	X\$18=	
C.BBE	Independent	. 2	Minus	*** (0	=- /	1	X42=			X84=	
	FIRST PRESE		712-		OR I	704=						
• 11	the entry in colur	L	+140=		OR	+280=						
1	the "Highest Nur	mber Previously Pa mber Previously Pa	id For IN THIS	S SPACE is	less than	20 enter *20 *	A	TOTAL DDIT. FEE		OR)	TOTAL ADDIT. FEE	
٦	he "Highest Num	ber Previously Pain	For (Total or	Independe	ent) is the	highest number	r four	nd in the app	ropriate box	in col	umn 1.	